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TRANSMITTAL FORM			Application Number		10/623,302-Conf. #3435
			Filing Date		July 18, 2003
			First Named Inventor		Sunita Satyapal
			Art Unit		1793
(to be used for all correspondence after initial filing)			Examiner N	ame	S. J. Bos
Total Number of Pages in This Submission 55		55	Attorney Docket Number		210_1091RCE
ENCLOSURES (Check all that apply)					
X Fee Transi	l.				After Allowance Communication to TC
Fee Attached		Licensing-rel	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences
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After Final Petition to Co					Proprietary Information
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Firm Name	MARJAMA MULDOON BLASIAK & SULLIVAN LLP				
Signature	/William W. Habelt/				
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Date	March 3, 2008			Reg. No.	29,162

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/623,302-Conf. #3435 FEE TRANSMITTAL July 18, 2003 Filing Date Sunita Satvapal First Named Inventor For FY 2008 Examiner Name S. J. Bos Applicant claims small entity status. See 37 CFR 1.27 1793 Art I Init TOTAL AMOUNT OF PAYMENT Attorney Docket No 210 1091RCE 180.00 METHOD OF PAYMENT (check all that apply) Credit Card Money Order Other (please identify): Deposit Account Name CARRIER CORPORATION x Deposit Account Deposit Account Number\_ 03-0835 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity Small Entity Application Type Fee (\$) Fec (\$) Fee (S) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) 210 Utility 310 155 510 255 105 Design 210 105 100 50 130 65 Plant 210 105 310 155 160 80 Reissue 310 155 510 255 620 310 Provisional 210 105 0 Λ 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Multiple Dependent Claims Total Claims** Extra Claims Fee (\$) Fee Paid (\$) - 20 = \_ x Fee (\$) Fee Paid (S) HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) -3= x HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = \_\_\_\_\_ /50 = \_\_\_\_\_ (round **up** to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification. \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 SUBMITTED BY Registration No Signature /William W. Habelt/ 29,162 Telephone (315) 425-9000 (Attorney/Agent) Name (Print/Type) William W. Habelt Date March 3, 2008

## Fee Transmittal

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